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FORM 3	For	Am Authorized Co	mmittee	Office	a Use Only	
1. NAME OF COMMITTEE (in	TYPE OR :	,	Example: If typing, type over the lines.	12FE4M5		
FRIENDS	DF MAT	TI MATISIUI	NAGA TICIC	ONG RESS.		_
1.1.1.1.1		111111				ل
ADDRESS (number a	nd street	8. KALAK	AUIA AIVIE I	#31104		لـ
Check if different than previously reported. (ACC)				<u> </u>		
		<u>alulu</u>		1411 196	18112]-	
2. FEC IDENTIFIC	CATION NUMBER ¥	СПУ		STATE A	ZIP CODE A STATE ▼ DISTRI	ICT
C 003	83562	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	HI P	
i. TYPE OF RE	PORT (Choose One) eports:		RE-Election Report for th		:	
. April 1	5 Quarterly Report (Q1)	i	Primary (12P)	General (12G)	Runoff (12F	7)
.hdv 14	i Quarterly Report (Q2)		Convention (12C)	Special (12S)		
•	or 15 Quarterly Report (	23) Election	M M 2 / D O		in the	
Januar	y 31 Year-End Report (1	(c) 30-Day P	OST-Election Report for t	the:		
			General (30G)	Runoff (30R)	Special (30	JS)
 Termini	ation Report (TER)	Election	M N D D	4 5	in the : State of	: .
5. Covering Period	<u>/0</u>	1 12011	through	2,31,2	01:1	
certify that I have to Type or Print Name			knowledge and belief it China	is true, correct and co.	mplete.	
Signature of Treasur	er	alvin C.	7	Date 01	25 201	2
NOTE: Submission of	false, erroneous, or inc	omplete information m	ey subject the person sign	ning this Report to the p	enalties of 2 U.S.C. §43	37g.
Office Use Only				1	FEC FORM 3 (Revised 02/2003)	